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REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

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1. NAME COM	E OF MITTEE (in full)	TYPE OR PRINT ▼		mple: If typing, typr r the lines.	pe 12FE	4M5	
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C	00543.7	7.7	3. IS THIS REPORT	NEW (N)	OR 🔲	AMENDED (A)	
(Choo	E OF REPORT se One) Quarterly Reports: April 15 Quarterly Report (July 15 Quarterly Report (October 15 Quarterly Report (January 31 Year-End Report (July 31 Mid-Year Report (Non-electi Year Only) (MY) Termination Report (TER)	Q2)	for the:		(M7) Ge	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) neral (12G) ecial (12S)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R) in the State of Special (30S) in the State of
5. Covering Period 0.7 2014 through 09 30 2014							
Type or Print Name of Treasurer Signature of Treasurer Date Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.							
1	Office Use Only						FORM 3X ev. 12/2004